

Towards Gender Equality with Care-sensitive Social Protection

Unpaid care work and social protection are intrinsically linked. Women and girls' uptake of social protection provisions is affected by their unpaid care work responsibilities. Conversely these essential provisions can help alleviate the drudgery and burden that unpaid care work places upon them. Yet despite the considerable body of research evidence that demonstrates these clear connections, unpaid care work remains largely invisible in social protection policies and programming. In order to address this challenge, policies must recognise the value of women's work, shift the burden of care work away from women and families and improve access to the vital services that will help improve women and girls' wellbeing.

Linking unpaid care work and social protection

Unpaid care is intertwined with social protection in numerous ways. Unpaid care work responsibilities affect the ways and extent to which social protection provisions are used by poor women. This is mainly because access to social protection takes time and effort that women may not have because of their socially prescribed and entrenched roles as care providers. At the same time social protection provisions have the potential to alleviate the drudgery of care work on women and girls. For instance improved access to fuel and water (through public works programmes) reduce the heavy labour of fetching and carrying, improve women's and girls' health and leisure time. Likewise social transfers and unconditional cash transfers can recognise the extra work that women and girls spend in care work activities and provide support for dependants and carers.

However, the main findings of an IDS review of policies in 53 low- and middle-income countries revealed that unpaid care continues to be largely invisible at all levels of policy in both sectors –

in statements of policy intent, in implementation, and in outcomes.

Policies examined included conditional cash transfers, public works, social transfers, unconditional cash transfers and integrated programmes. The review found that only 23 out of 149 social protection policies expressed the intent to address unpaid care concerns. These 23 policies were spread across 16 countries. The region with the largest number of care-sensitive programmes was Sub Saharan Africa (11), followed by Latin America (7).

The review also found that unconditional cash transfers were more sensitive to care concerns – over 40 per cent of all unconditional cash transfers had an element of unpaid care. Twenty-one per cent of public works programmes also had an element of care.

The most care-insensitive policies were conditional cash transfers (12 per cent), social transfers (9 per cent) and integrated programmes (6 per cent) – many of which also had conditionalities attached to them. Table 1 shows the regional spread of different types of social protection policies that had care-sensitive aims and objectives. ➤

“Accessing social protection takes time and effort that women may not have because of their socially prescribed roles as care providers.”

What is unpaid care work?

Care work is essential to human wellbeing. Care sustains and reproduces society, and has a widespread, long-term, positive impact on wellbeing and development. Across all societies, women and girls bear greater responsibility for unpaid care than men.

Unpaid care work includes cooking, cleaning, washing, fetching water and firewood, as well as taking care of children, the elderly and other vulnerable groups.

Women's disproportionate responsibility for unpaid care work means their ability to choose to continue their education, get a job, find time to participate in community meetings, access a health clinic or just have time to rest is immediately constrained.

The socially prescribed and entrenched gender roles that denote women and girls as care providers can undermine their rights, limit their opportunities, capabilities and choices, and so impede their empowerment.

We cannot address gender inequality without considering women's unpaid care work and the impact that this has on their right to education, health, decent work and leisure.

Table 1 Care-sensitive social protection policies by region and type

Region	Number of countries studied	Number of policies examined	Number of policies addressing unpaid care concerns (by policy type)				
			Conditional Cash Transfers	Public Works	Social Transfers	Unconditional Cash Transfers	Integrated/ other policies
Europe and Central Asia	1	1					1
East Asia and Pacific	7	10					1
Latin America and the Caribbean	18	50	5		1	1	
Middle East and North Africa	1	1	1				
South Asia	5	33		3	1		
Sub-Saharan Africa	21	54			1	8	
Total	53	149	6 (out of 49)	3 (out of 14)	3 (out of 33)	9 (out of 22)	2 (out of 31)

What does 'care-sensitive social protection' currently look like?

Of the 23 policies that addressed unpaid care concerns, all recognised care work as a burden that fell inequitably on poor women and girls. There were no social protection policies that aimed to redistribute care work from women to men, while only two social protection policies alluded to the intent to reduce the drudgery of care work, and two others had a strong element of support in terms of advice and training programmes.

Of those social protection policies that recognised care, most focused on redistributing care responsibilities from

the family to the state. The rationale behind this was predominantly to enable women to enter into paid work and contribute to economic life. Other 'care-sensitive' policies included those which provide financial and care services support and legal services for people doing unpaid care (including parents, mothers, poor working parents, orphans and vulnerable children).

The two policies aimed at reducing the drudgery associated with unpaid care were both in India, and implemented through building community assets such as wells, roads and ponds, which aim to increase women and girls' livelihood security and wellbeing.

Examples of 'care-sensitive' Social Protection Policies

Argentina's Universal Family Allowance per Child for Social Protection (AUH)

AUH provides a monthly family allowance for parents who are unemployed or work in the informal economy (recognising that most women do not work in the formal sector). The Universal Pregnancy Allowance (*Asignación Universal por Embarazo* or AUE), provides a monthly salary to pregnant women who are unemployed. These two allowances can be received together if caring for children under the age of 18, or caring for a disabled child. *Plan Jefes y Jefas de Hogar Desocupados* (Unemployed Heads of Households Plan), provides an income transfer to unemployed heads of households with dependants under the age of 18 or with disabled household members of any age. Here again, there is an underlying recognition that women are less likely to participate in formal labour markets.

Egypt's Ain El-Sira Pilot Conditional Cash Transfer Programme

The conditional cash transfer programme is targeted at women and female heads of households, but an interesting element is that compensation is provided to them for any time spent fulfilling programme conditions. In addition, parents receive more money for keeping girls in school than keeping boys in school. Furthermore, both male and female heads of household are encouraged to visit health clinics and attend nutrition talks.

India and Bangladesh's public works programmes

In the 1970s, the state of Maharashtra in India operationalised the Maharashtra Employment Guarantee Act (MEGA) – a public works programme. One of the scheme's basic provisions was equal wages for men and women, and maternity provisions for pregnant women workers. India's rights-based programme, the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) provides a crèche at the worksite, so that women are able to balance their childcare responsibilities with work.

Similar care-sensitive provisions were also found in Bangladesh's Rural Employment Opportunities for Public Assets (REOPA), under which women workers are provided maternity leave, and are also included in needs assessments which take their household and reproductive responsibilities into consideration.

Cambodia's National Social Protection Strategy (NSPS) for the Poor and Vulnerable (2011 – 2015)

The national strategy contains specific provisions for organising public works programmes that encourage the participation of women. In recognition that women have the responsibility to care for children in the household and that this should not restrict their opportunity to work on the public works programmes, there are special provisions such as food, water and a crèche on site.

Kenya and South Africa's Social transfer programmes

Both these countries provide special transfers to families taking care of orphaned and vulnerable children, recognising that this care takes extra resources and therefore needs to be supported. South Africa's Child Support Grant is an explicit recognition of the care responsibilities involved in bringing up a child, and that the state needs to provide support (in this case financial) to poor and vulnerable families for this responsibility.

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Policy recommendations

Care-sensitive social protection programmes should have care related provisions that recognise, reduce and redistribute unpaid care work responsibilities, represent carers in decision making, and have implementation and monitoring mechanisms that make unpaid care visible.

In order to build a positive and mutually reinforcing cycle of social protection outcomes and women's empowerment, policy makers should:

1. Recognise the value of women's work by:

- Monetising the value of women's work,
- Instituting reward systems for women's contributions,
- Celebrating care as valuable, making it visible amongst communities and governments.

2. Reduce the drudgery associated with care work by ensuring that access to social protection programmes is easier and less time-consuming. Some practical ways of doing this include:

- Providing better outreach of benefits through programme/front line staff,
- Raising awareness amongst programme staff of the care responsibilities of women and girls,
- Reducing the arduousness of conditionalities imposed by social protection programmes by ensuring easier access and better outreach. For example, having mobile clinics to help reduce the distances women must travel for healthcare.
- Undertaking useful and accessible asset construction through public works programmes in order to ease women's daily tasks. These may include building roads to schools and health care centres, and establishing water wells, hand pumps and reservoirs closer to homes.

3. Redistribute care work from women to men, encouraging them to share in household responsibilities. For example by making men explicitly responsible for fulfilling conditionalities imposed by social protection programmes, such as taking children to school and health centres, and attending training programmes.

4. Redistribute care work from families to the state – this is especially critical in providing support to women and girls, enabling them to partake in programmatic opportunities such as training programmes and work on public works. Some examples include:

- Providing free and good quality on-site crèche facilities and childcare support,
- Increasing the value of social transfers to provide additional resources for supporting care provision,
- Introducing unconditional cash transfers to share the costs of care without imposing time-consuming and arduous conditionalities.

5. Represent carers in decision making around social protection programmes by:

- Instilling a positive appreciation of care-work amongst women and girls such that they value and self-recognise their contribution to social protection programmes,
- Putting in place feedback and grievance redressal mechanisms that enable programme participants to assess and express the impact of social protection programmes on their unpaid care work responsibilities.

6. Establish effective implementation and monitoring mechanisms. It is not enough to simply design social protection programmes in a way that is care-sensitive. Programmes like India's MGNREGA have the required provisions such as on-site crèche, but these are not being implemented. This can be done by:

- Acknowledging the unequal burden of care work and allowing for the fact that it often takes women and girls more time and resources to access social protection programmes, which may explain a lack of uptake,
- Monitoring and supporting the implementation of care-sensitive provisions through regular data collection, evaluating use and impact,
- Modifying existing programmes, especially in response to beneficiary feedback, to make them more care-sensitive.

Further reading

ActionAid international (2013) *Making Care Visible – Women's Unpaid Care Work in Nepal, Nigeria, Uganda and Kenya*, London: ActionAid International

Chopra, D.; Kelbert, A.U. and Iyer, P. (2013) *A Feminist Political Economy Analysis of Public Policies Related to Care: A Thematic Review*, Brighton: IDS

Eyben, R. (2013) 'Getting Unpaid Care onto Development Agendas', *IDS Policy Briefing 31*, Brighton: IDS

Interactions web pages on unpaid care work, <http://interactions.eldis.org/unpaid-care-work>

Credits

This *IDS Policy Briefing* was written by **Deepti Chopra**, Research Fellow in the Vulnerability and Poverty Reduction Team at IDS, through her work on the 'Making unpaid care visible' stream of the UK Aid-funded programme on 'Influencing Policies to Support the Empowerment of Women and Girls'. It was edited by **Carol Smithyes**.

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